1. Incident Name:	2. Operational Period: (Date / Time)	3. Demobilization		OUEOU OUE
Gold King M. Blowout Respo			DEMOBILIZATION I	CS 221 - EPA
	sed MARK HALES	Contact No:	214 - 232	1-7134
4. Unit/Personnel Relea		Estimated Time Departure/Arriva		
5. Transportation Method FUGHT		6. Actual Release Date/Time: 8/15/15 0900		
8. Destination:		7. Manifest:	Yes, Number:	☐ No
DALLAS: RCS'		9. Notified:	☐ Agency ☐ Region ☐ Area Name: Date:	□ Dispatch
10. Unit Leader Responsible for Collecting Performance Rating:				
11. Unit/Personnel:				
Demobilization Unit Leader check the appropriate box:				
Logistics Section	Supply Unit			
	Communications Unit			
	Facilities Unit			
	Ground Support Unit Leader			
	\square			
Finance Section	Time Unit			W. 17
Planning Section	Documentation Unit			
Other				
12. Remarks: Emergency Contact Name/Number				
DETREASA HANDSPIKE 214-710-4961				
Has ben advised to call in when prriving @ destination				
5. Prepared by: Gence Good - 7 (Date / Time)				
Name/Position: MARC HAYES IC Signature: Makety 8/15/15 6800				
DEMOBILIZATION CHECK-OUT ICS 221 – EPA (Rev 02/10)				

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